U. S. Cost Reimoursable (Department, bureau, or establishment) Voucher prepared at (Give place and date)								1														
												THE UNITED STATES, Dr., Payee's Account No. 847							COPY OE 3			
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	(Ad	iress)	(City) RTICLES OR SERVICE		tate)		- 															
No. and Date of Order	Date of Delivery or Service	(Enter description, schedule, and	item number of contrac other information deem	t or Federal su	al supply QUANTITY		Cost Per		AMOUNT Dollars Cts													
	-	Discount Terms			· · · · · · · · · · · · · · · · · · ·																	
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AYMENT:																						
Complete Partial																						
Final		Use co	ontinuation sheet(s) if nec	essary	j.																	
hipped from				Government I				Total	1,518	41												
I certify that the above bill is correct and just and that payment has not been received. (Payee must N								-														
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Contract No. Al	01.	Date	Reg. No.		D)ate	lı d	nvoice Rec'	d.													
ursuant to autho	ority vested in me,	I certify that this accoun	t is correct and proper fo	r payment.				1//														
			STATINTL	†				ng Officer)	3/56													
		1	SIGN	. <u> </u>				-	TATINT	L												
CONT	RACTING OFF	TCIES -	ONLY	litle																		
Title				Date																		
	THE REVERSE OF T	HIS FORM MUST BE EXECUTED	WHEN PURCHASES ARE MADE	OR SERVICES SEC	URED WITH	OUT WRITTEN A	GREEMENT I	N ANY FORM														
	ACCOU	NTING CLASSIFICATION	ON (Appropriation Symi	ol must be sh	own; oth	er classificat	ion option	ial)		===												
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APPRO	VING OFFIC	ER Y																				
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∫ Check	No	dated	, 19, f	or \$			{ on Tr favor	easurer of t of payee na	he United Stat imed above.	es in												
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